

(All of the information in this report is public information)

Office sought or ballot question LIBRARY BALLOT QUESTION District

Period of time covered by report:

from 8/31/14 to 11/30/14

Give the total for all contributions received during the period of time covered by this report. Contributions should be listed by type (money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate sheet to itemize all contributions from a single source that exceeded \$100 during the calendar year. This itemization must include name, address, employer or occupation if self-employed, amount and date for these contributions.

CASH	\$	<u>0</u>	TOTAL CASH-ON-HAND	\$	<u>0</u>
IN-KIND	+	\$ 4992.95 <u>624.00</u>	PK		
TOTAL AMOUNT RECEIVED	=	\$ <u>624.00</u>			

Include the amount, date and purpose for all disbursements made during the period of time covered by report.
Attach additional sheets if necessary.

Date	Purpose	Amount
	SEE ATTACHED SHEET	
	TOTAL	

Corporations must list any media project or corporate message project for which contribution(s) or expenditure(s) total more than \$200. Submit a separate report for each project. Attach additional sheets if necessary.

Project title or description _____

<i>Date</i>	<i>Purpose</i>	<i>Name and Address of Recipient</i>	<i>Expenditure or Contribution Amount</i>
		TOTAL	

I certify that this is a full and true statement.

Date _____

Telephone NA

Email (if available)

Address 4005 HAYES ST NE COLUMBIA HEIGHTS MN 55421

Office of the Minnesota Secretary of State – 2014 Campaign Manual – 7/18/2014 Revised Edition

Report

Office

Name

For Office Use Only:

Date	Type	Recipient	Amount	Description
10/24/2014	check	Insty Prints	352.12	Flyers
10/28/2014	check	NE News	504	Flyers
10/28/2014	check	Kathy Ahlers	61.2	Reimbursement - Stamps
10/28/2014	check	JanWay Company	195.99	Buttons
11/22/2014	bank charge	NE Bank	5	Bank charge
11/22/2014	check	CH Library Foundatio	27.73	Donation

IN-KIND DONATION

10/29/14 NORTHEASTER NEWSPAPER
2844 JOHNSON ST NE
MPLS MN 55418
612 788-9003

AMOUNT ~~\$600.00~~ ^{PL} \$624.00
DESCRIPTION - AD IN PAPER